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DIRECTOR

State of California—Health and Human Services Agency
Department of Health Care Services



GAVIN NEWSOM
GOVERNOR

April 28, 2022

Sent via e-mail to: todd.metcalf@lakecountyca.gov

Todd Metcalf, Director
Lake County Behavioral Health Services
6302 Thirteenth Avenue
Lucerne, CA 95458

SUBJECT: Annual SABG County Compliance Unit Findings Report

Dear Director Metcalf:

The Department of Health Care Services (DHCS) is responsible for monitoring compliance to requirements of the Substance Abuse Block Grant (SABG) and the terms of the Contract operated by Lake County.

The County Compliance Unit (CCU) within the Audits and Investigations Division (A&I) of DHCS conducted a review of the County's compliance with contract requirements based on responses to the monitoring instrument, discussion with county staff, and supporting documentation provided by the County.

Enclosed are the results of Lake County's Fiscal Year 2021-22 SABG compliance review. The report identifies deficiencies, required corrective actions, advisory recommendations, and referrals for technical assistance.

Lake County is required to submit a Corrective Action Plan (CAP) addressing each deficiency noted to the Community Services Division (CSD), Community Support Branch (CSB), Policy, Monitoring and Financing Section (PMFS) Analyst by 6/28/2022. Please use enclosed CAP form and submit the completed CAP and supporting documentation by email to the PMFS analyst at SABGcompliance@dhcs.ca.gov.

If you have any questions, please contact me at michael.bivians@dhcs.ca.gov.

Sincerely,

Michael Bivians
(916) 713-8966

Audits and Investigations Division
Medical Review Branch
Behavioral Health Compliance Section
County Compliance Unit
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Sacramento, CA 95814
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Distribution:

To: Director Metcalf,

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Cindy Berger, Audits and Investigations, Provider Compliance Unit Chief
Tracie Walker, Community Services Division, Community Support Branch Chief
Denise Galvez, Community Services Division, Operations Branch Chief
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April Giambra, Lake County Substance Use Disorder Services Administrator
Robert Chalmers, Lake County Staff Services Analyst II

COUNTY REVIEW INFORMATION

County:

Lake

County Contact Name/Title:

Robert Chalmers/Staff Services Analyst II

County Address:

6302 Thirteenth Avenue
Lucerne, CA 95458

County Phone Number/Email:

(707) 994-7090
robert.chalmers@lakecountyca.gov

Date of Review:

3/9/2022

Lead CCU Analyst:

Michael Bivians

Assisting CCU Analyst:

N/A

Report Prepared by:

Michael Bivians

Report Approved by:

Ayesha Smith

REVIEW SCOPE

- I. Regulations:
 - a. California Code of Regulations, Title 22, section 51341.1 – Drug Medi-Cal Substance Use Disorder Services
 - b. Code of Federal Regulations; Title 45, Part 96; Subpart L; section 96.121 through 96.137: Substance Abuse Prevention and Treatment Block Grant
 - c. United States Code, Title 42, Section 300x-21 through 300x-66: Block Grants regarding Mental Health and Substance Use
 - d. Health and Safety Code, Division 10.5, Section 11750 – 11970: Alcohol and Drug Programs

- II. Program Requirements:
 - a. Fiscal Year (FY) 2020-21 Substance Abuse Block Grant (SABG) Application, herein referred to as the SABG Application
 - b. Fiscal Year (FY) 2021-22 Substance Abuse Block Grant (SABG) Application, herein referred to as the SABG Application
 - c. State of California *Youth Treatment Guidelines Revised August 2002*
 - d. DHCS *Perinatal Practice Guidelines FY 2018-19*
 - e. National Culturally and Linguistically Appropriate Services (CLAS)
 - f. Mental Health and Substance Use Disorders Services (MHSUDS) Information Notices
 - g. Behavioral Health Information Notices (BHIN)

ENTRANCE AND EXIT CONFERENCE SUMMARIES

Entrance Conference:

An Entrance Conference was conducted via WebEx on 3/9/2022. The following individuals were present:

- Representing DHCS:
Michael Bivians, County Compliance Monitoring II Chief
Angela Rankin, Associate Governmental Program Analyst (AGPA)
- Representing Lake County:
Todd Metcalf, Lake County Behavioral Health Services Director
April Giambra, Substance Use Disorder Services Administrator
Robert Chalmers, Staff Services Analyst II
Vanessa Mayer, Senior Staff Services Analyst
Kate Lewis, Staff Services Analyst I
Elise Jones, Deputy Director, Administration
Christine Andrus, Fiscal Program Manager
Salma Ramadan, Staff Services Analyst I

During the Entrance Conference, the following topics were discussed:

- Introductions
- Overview of the review process

Exit Conference:

An Exit Conference was conducted via WebEx on 3/9/2022. The following individuals were present:

- Representing DHCS:
Michael Bivians, County Compliance Monitoring II Chief
Angela Rankin, AGPA
- Representing Lake County:
Todd Metcalf, Lake County Behavioral Health Services Director
April Giambra, Substance Use Disorder Services Administrator
Robert Chalmers, Staff Services Analyst II
Vanessa Mayer, Senior Staff Services Analyst
Kate Lewis, Staff Services Analyst I
Elise Jones, Deputy Director, Administration
Christine Andrus, Fiscal Program Manager
Salma Ramadan, Staff Services Analyst I

During the Exit Conference, the following topics were discussed:

- Follow-up documentation due date
- Feedback on monitoring protocols
- Implementation of DMC-ODS
- Implementation of Regional Model DMC-ODS

SUMMARY OF FY 2021-22 COMPLIANCE DEFICIENCIES (CD)

<u>Section</u>	<u>Number of CD's</u>
1.0 Administration	3
2.0 Prevention	0
3.0 Perinatal	0
4.0 Adolescent/Youth Treatment	0
5.0 Data/CalOMS	1
6.0 Program Integrity	0
7.0 Fiscal	2

CORRECTIVE ACTION PLAN (CAP)

Pursuant to the SABG County Application, Enclosure 2, Part I, Section 3, B, 5-7 each CD identified must be addressed via a CAP. The CAP is due within sixty (60) calendar days of the date of this monitoring report.

Please provide the following within the completed FY 2021-22 CAP:

- a) A statement of the CD.
- b) A list of action steps to be taken to correct the CD.
- c) A date of completion for each CD.
- d) The name of the person who will be responsible for corrections and ongoing compliance.

The PMFS analyst will monitor progress of the CAP completion.

Category 1: ADMINISTRATION

A review of the County's Maintenance of Records, service providers, referrals, services, contracts, and general provisions was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD 1.2.2:

SABG Application, Enclosure 2, I, 3, C

C. Sub-recipient Pre-Award Risk Assessment

County shall comply with the sub-recipient pre-award risk assessment requirements contained in 45 CFR 75.205 (HHS awarding agency review of risk posed by applicants). County shall review the merit and risk associated with all potential subcontractors annually prior to making an award.

County shall perform and document annual sub-recipient pre-award risk assessments for each subcontractor and retain documentation for audit purposes.

Findings: The County did not provide evidence demonstrating the annual sub-recipient pre-award risk assessments included an assigned risk level score for all potential subcontractors.

CD: 1.5.1:

SABG Application Enclosure 2, II, 17

17. Byrd Anti-Lobbying Amendment (31 USC 1352)

County certifies that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 USC 1352. County shall also disclose to DHCS any lobbying with non-Federal funds that takes place in connection with obtaining any Federal award.

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not provide evidence demonstrating subcontractor compliance with the Byrd Anti-Lobbying Amendment (31 USC 1352) provision.

CD: 1.5.4:

SABG Application, Enclosure 2, II, 13

13. Trafficking Victims Protection Act of 2000

County and its subcontractors that provide services covered by this Contract shall comply with the Trafficking Victims Protection Act of 2000 (USC, Title 22, Chapter 78, Section 7104) as amended by section 1702 of Pub. L. 112-239.

SABG Application, Enclosure 2, II, 23

23. Subcontract Provisions

County shall include all of the foregoing provisions in all of its subcontracts.

Findings: The County did not make available evidence demonstrating County compliance with the Trafficking Victims Protection Act of 2000 (USC, Title 22, Chapter 78, Section 7104) as amended by section 1702 of Pub. L. 112-239 provision.

Category 5: DATA/CALOMS

A review of data submissions via CalOMS was conducted to ensure compliance with applicable regulations and standards. The following deficiency in regulations, standards or protocol requirements was identified:

COMPLIANCE DEFICIENCY:

CD: 5.1.1:

SABG Application, Enclosure 2, III, 2, C-F

2. California Outcomes Measurement System for Treatment (CalOMS-Tx)

The CalOMS-Tx business rules and requirements are:

- C. Electronic submission of CalOMS-Tx data shall be submitted by County within 45 days from the end of the last day of the report month.
- D. County shall comply with data collection and reporting requirements established by the DHCS CalOMS-Tx Data Collection Guide (<https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx>) and all former Department of Alcohol and Drug Programs Bulletins and DHCS Information Notices relevant to CalOMS Tx data collection.
- E. County shall submit CalOMS-Tx admission, discharge, annual update, resubmissions of records containing errors or in need of correction, and “provider no activity” report records in an electronic format approved by DHCS.
- F. County shall comply with the CalOMS-Tx Data Compliance Standards established by DHCS for reporting data content, data quality, data completeness, reporting frequency, reporting deadlines, and reporting method, as identified online at:
<https://www.dhcs.ca.gov/provgovpart/Pages/CalOMS-Treatment.aspx>

Findings: The County’s Open Admissions report is not in compliance.

Category 7: FISCAL

A review of the SABG fiscal services was conducted to ensure compliance with applicable regulations and standards. The following deficiencies in regulations, standards or protocol requirements were identified:

COMPLIANCE DEFICIENCIES:

CD 7.1.1:

SABG Application, Enclosure 2, I, 2, A

A. Restrictions on Salaries

County agrees that no part of any federal funds provided under this Contract shall be used by the County or its subcontractors to pay the salary and wages of an individual at a rate in excess of Level II of the Executive Schedule, as found online at: http://grants.nih.gov/grants/policy/salcap_summary.htm

Findings: The County did not provide evidence demonstrating verification that SABG funds are not used to pay an individual's salary in excess of Level II of the Executive Schedule.

CD 7.1.2:

SABG Application, Enclosure 2, I, 2, I, 1-3

I. Restrictions on Use of SABG Funds to Pay for Services Reimbursable by Medi-Cal

1. County shall not utilize SABG funds to pay for a service that is reimbursable by Medi-Cal.
2. The County may utilize SABG funds to pay for a service included in the California State Plan or the Drug Medi-Cal Organized Delivery System (DMC-ODS), but which is not reimbursable by Medi-Cal.
3. If the County utilizes SABG funds to pay for a service that is included in the California State Plan or the DMC-ODS, the County shall maintain documentation sufficient to demonstrate that Medi-Cal reimbursement was not available.

Findings: The County did not provide evidence demonstrating verification that SABG funds used to pay for services reimbursable by Medi-Cal are consistent with restrictions, specifically:

- County shall not utilize SABG funds to pay for a service that is reimbursable by Medi-Cal;
- The County may utilize SABG funds to pay for a service included in the California State Plan or the Drug Medi-Cal Organized Delivery System (DMC-ODS), but which is not reimbursable by Medi-Cal; and
- If the County utilizes SABG funds to pay for a service that is included in the California State Plan or the DMC-ODS, the County shall maintain documentation sufficient to demonstrate that Medi-Cal reimbursement was not available.

TECHNICAL ASSISTANCE

Lake County did not request Technical Assistance during this review.